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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/819,126	
	Filing Date	March 27, 2001	
	First Named Inventor	James H. Errico	
	Art Unit	2623	
	Examiner Name	Justin E. Shepard	
Total Number of Pages in This Submission		Attorney Docket Number	7146.0107

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return postcard
Remarks The Commissioner is hereby authorized to charge any additional fees, or credit any overpayment, to Deposit Account No. 03-1550.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Chernoff, Vilhauer, McClung & Stenzel 601 SW Second Ave., Suite 1600 Portland, OR 97204		
Signature			
Printed Name	Kevin L. Russell		
Date	October 11, 2006	Reg. No.	38,292

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	Kevin L. Russell	Date	October 11, 2006

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 09/819,126 Confirmation No.: 3921
Applicant : James H. Errico
Filed : March 27, 2001
TC/A.U. : 2623
Examiner : Justin E. Shepard
Docket No. : 7146.0107
Customer No. : 55,648
Title : AUDIOVISUAL MANAGEMENT SYSTEM

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action of July 11, 2006, please amend the above-identified application as follows:

Amendments to the Specification are not included in this paper.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Amendments to the Drawings are not included in this paper.

Remarks/Arguments begin on page 13 of this paper.

An **Appendix** is not included in this paper.